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CONFIRMATION NO. 5741

SERIAL NUMBER 10/523,782	FILING OR 371(c) DATE 07/21/2005 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 30479/39572A
APPLICANTS Zehra Rowjee, Glenview, IL;				
** CONTINUING DATA ***** This application is a 371 of PCT/US03/25142 08/11/2003 which claims benefit of 60/402,525 08/09/2002				
** FOREIGN APPLICATIONS ***** <div style="text-align: center;">** SMALL ENTITY **</div>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY IL	SHEETS DRAWING	TOTAL CLAIMS 20 INDEPENDENT CLAIMS 5
ADDRESS 04743				
TITLE Pharmacological treatment of psoriasis				
FILING FEE RECEIVED 565	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	